

The House Committee on Health and Human Services offers the following substitute to SB 443:

A BILL TO BE ENTITLED  
AN ACT

To amend Chapter 21A of Title 33 of the Official Code of Georgia Annotated, relating to the "Medicaid Care Management Organizations Act," so as to create the Medicaid Care Management Organization Legislative Oversight Committee; to provide for its membership, terms, and meetings; to provide for its duties; to provide for cooperation with other agencies; to provide for an annual report; to provide for expenses for members; to provide for an audit; to amend Article 2 of Chapter 1 of Title 37 of the Official Code of Georgia Annotated, relating to powers and duties of the Department of Behavioral Health and Developmental Disabilities, so as to create the Department of Behavioral Health and Developmental Disabilities Legislative Oversight Committee; to provide for its membership, terms, and meetings; to provide for its duties; to provide for cooperation with other agencies; to provide for an annual report; to provide for an audit; to amend Code Sections 49-4-142 and 49-5-273 of the Official Code of Georgia Annotated, relating to Medicaid and the PeachCare for Kids Program, respectively, so as to provide for legislative findings; to provide requirements for the Department of Community Health when health maintenance organizations terminate contracts with health care providers; to allow recipients of Medicaid and participants in the PeachCare for Kids Program to switch their enrollment to another health maintenance organization if such health care providers are terminated; to provide for related matters; to provide for effective dates; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

**SECTION 1.**

Chapter 21A of Title 33 of the Official Code of Georgia Annotated, relating to the "Medicaid Care Management Organizations Act," is amended by adding a new Code section to read as follows:

"33-21A-13.

(a) There is created the Medicaid Care Management Organization Legislative Oversight Committee which shall be composed of eight persons: three members of the House of

Representatives appointed by the Speaker of the House of Representatives, three members of the Senate appointed by the Lieutenant Governor, and one member of the House of Representatives and one member of the Senate appointed by the Governor. The members of the committee shall be selected within ten days after the convening of the General Assembly in each odd-numbered year and shall serve until their successors are appointed.

(b) The Lieutenant Governor shall appoint a member of the committee to serve as chairperson, and the Speaker of the House of Representatives shall appoint one member to serve as vice chairperson during each odd-numbered year. The Speaker of the House of Representatives shall appoint a member of the committee to serve as chairperson, and the Lieutenant Governor shall appoint one member of the committee to serve as vice chairperson during each even-numbered year. The committee shall meet at least three times each year and, upon the call of the chairperson, at such additional times as deemed necessary by the chairperson.

(c) It shall be the duty of the committee to review and evaluate:

(1) Information relating to consumer complaints involving eligibility determinations;

(2) Information relating to provider complaints involving payment or coverage issues;

(3) Information relating to a care management organization's compliance with contract terms, including timeframes and deadlines;

(4) Information relating to a care management organization's compliance with statutory and regulatory requirements; and

(5) Such other information or reports as deemed necessary by the committee.

(d) The Department of Community Health and the Department of Insurance shall cooperate with the committee and provide such information or reports as requested by the committee for the performance of its functions.

(e) The committee shall make an annual report of its activities and findings to the membership of the General Assembly and the Governor within one week of the convening of each regular session of the General Assembly. The chairperson of the committee shall deliver written executive summaries of such report to the members of the General Assembly prior to the adoption of the General Appropriations Act each year.

(f) The members of the committee shall receive the allowances authorized for legislative members of legislative committees. The funds necessary to pay such allowances shall come from funds appropriated to the House of Representatives and the Senate.

(g) The committee shall be authorized to request that a performance audit of the services provided by care management organizations for Medicaid and PeachCare for Kids be conducted."

**SECTION 1A.**

Article 2 of Chapter 1 of Title 37 of the Official Code of Georgia Annotated, relating to powers and duties of the Department of Behavioral Health and Developmental Disabilities, is amended by adding a new Code section to read as follows:

"37-1-29.

(a) There is created the Department of Behavioral Health and Developmental Disabilities Legislative Oversight Committee which shall be composed of eight persons: three members of the House of Representatives appointed by the Speaker of the House of Representatives, three members of the Senate appointed by the Lieutenant Governor, and one member of the House of Representatives and one member of the Senate appointed by the Governor. The members of the committee shall be selected within ten days after the convening of the General Assembly in each odd-numbered year and shall serve until their successors are appointed.

(b) The Lieutenant Governor shall appoint a member of the committee to serve as chairperson, and the Speaker of the House of Representatives shall appoint one member to serve as vice chairperson during each odd-numbered year. The Speaker of the House of Representatives shall appoint a member of the committee to serve as chairperson, and the Lieutenant Governor shall appoint one member of the committee to serve as vice chairperson during each even-numbered year. The committee shall meet at least three times each year and, upon the call of the chairperson, at such additional times as deemed necessary by the chairperson.

(c) It shall be the duty of the committee to review and evaluate the effectiveness of all programs overseen by the department, including, but not limited to, evaluating the quality of mental health treatment provided to persons housed at Central State Hospital in Milledgeville and any other state operated facilities, at the discretion of the committee.

(d) The board shall cooperate with the committee and provide such information or reports as requested by the committee for the performance of its functions.

(e) The committee shall make an annual report of its activities and findings to the membership of the General Assembly and the Governor within one week of the convening of each regular session of the General Assembly. The chairperson of the committee shall deliver written executive summaries of such report to the members of the General Assembly prior to the adoption of the General Appropriations Act each year.

(f) The committee shall be authorized to request that a performance audit of the services provided by the department be conducted."

**SECTION 2.**

Code Section 49-4-142 of the Official Code of Georgia Annotated, relating to Medicaid, is amended by adding a new subsection to read, as follows:

"(d) In the event that a health maintenance organization with which the department has contracted to provide health care services to persons pursuant to this article proposes to terminate a contract with a provider of medical assistance, the department shall:

(1) Allow any recipient of medical assistance who is enrolled through such health maintenance organization and who uses the provider with which the health maintenance organization proposes to terminate its contract at least 60 days' notice to switch his or her enrollment to a different health maintenance organization which provides health care services to persons pursuant to this article regardless of when such recipient's next annual opportunity to select a health maintenance organization will occur; and

(2) Provide or arrange for at least 60 days' notice to the recipient of medical assistance, including, but not limited to, information on which other health maintenance organizations have a contract with such provider, an explanation of how to switch enrollment, and specific contact information for a person designated to process requested changes."

**SECTION 3.**

Code Section 49-5-273 of the Official Code of Georgia Annotated, relating to the PeachCare for Kids Program, is amended by revising subsection (m) as follows:

"(m) Nothing in this article shall be interpreted in a manner so as to preclude the department from contracting with licensed health maintenance organizations (HMO) or provider sponsored health care corporations (PSHCC) for coverage of program services and eligible children; provided, however, that such contracts shall require payment of premiums and copayments in a manner consistent with this article. The department may require enrollment in a health maintenance organization (HMO) or provider sponsored health care corporation (PSHCC) as a condition of receiving coverage under the program. Notwithstanding the foregoing, in the event that a health maintenance organization with which the department has contracted to provide health care services to persons under PeachCare proposes to terminate a contract with a health care provider providing services to PeachCare participants, the department shall:

(1) Allow any participant in PeachCare who is enrolled through such health maintenance organization and who uses the provider with which the health maintenance organization proposes to terminate its contract at least 60 days' notice to switch his or her enrollment to a different health maintenance organization which provides health care services to

131 persons under PeachCare regardless of when such participant's next annual opportunity  
132 to select a health maintenance organization will occur; and  
133 (2) Provide or arrange for at least 60 days' notice to the participant, including, but not  
134 limited to, information on which other health maintenance organizations have a contract  
135 with such provider, an explanation of how to switch enrollment, and specific contact  
136 information for a person designated to process requested changes."

137 **SECTION 4.**

138 Section 1 of this Act shall become effective on January 1, 2011. All other parts of this Act  
139 shall become effective on July 1, 2010.

140 **SECTION 5.**

141 All laws and parts of laws in conflict with this Act are repealed.